Case 19-10488-TPA Doc 14 Filed 05/30/19 Entered 05/30/19 13:26:52 Desc Main

| Fill in this info | rmation to identify your | case: | | |
|---------------------|---------------------------|------------------|-----------------|--------------------------------------|
| Debtor 1 | Robert J Flood | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Valerie A Flood | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States B | Sankruptcy Court for the: | WESTERN DISTRICT | OF PENNSYLVANIA | |
| Case number | 19-10488 | | | |
| (if known) | | _ | | ☐ Check if this is ar amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| t 1: Summarize Your Assets | | |
|--|---|---|
| | Your a | ssets of what you own |
| Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 95,000.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 39,748.92 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 134,748.92 |
| t 2: Summarize Your Liabilities | | |
| | | abilities It you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 129,226.00 |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 1,520.98 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 165,095.00 |
| Your total liabilities | \$ | 295,841.98 |
| t 3: Summarize Your Income and Expenses | | |
| Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 5,092.93 |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 5,086.83 |
| Answer These Questions for Administrative and Statistical Records | | |
| Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | r other sc | hedules. |
| ■ Yes What kind of debt do you have? | | |
| | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

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Debtor 1 Pobert J Flood Valerie A Flood Case number (if known) 19-10488

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,631.15

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Tota | al claim |
|--|------|------------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$_ | 1,520.98 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$_ | 146,205.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 147,725.98 |

| | Case | 19-10488-1P | A Doc 14 | | | 05/30/ | | Entered U5/ | 30/19 13 | 3:26:52 | De | esc Main |
|---------------------|--|--------------------------------|--|-------------------------|----------------|----------------------------|------------------------|--|--------------------------|-----------------------------|-------|---|
| 311 | in this inform | nation to identify yo | our case and th | | | nent | Pau | e 3 of 49 | | Ī | | |
| | | | | iio iiiiiig | 9. | | | | | | | |
| Del | btor 1 | Robert J Flood | | Name | | | Last Nar | ne | | | | |
| Del | btor 2 | Valerie A Floo | | rianio | | | Luot Hui | | | | | |
| | ouse, if filing) | First Name | | Name | | | Last Nar | ne | | | | |
| Uni | ited States Ba | inkruptcy Court for th | e: WESTERN | DISTR | RICT | OF PENNS | SYLVAI | NIA | | | | |
| _ | | | | | | | | | | | | |
| Cas | se number _ | 19-10488 | | | | | - | | | | | Check if this is an amended filing |
| | | | | | | | | | | | | amonada illing |
| ٦, | α: -: - I ⊏ - | 400 A /D | | | | | | | | | | |
| _ | | rm 106A/B | | | | | | | | | | |
| 30 | chedul | e A/B: Pro | perty | | | | | | | | | 12/15 |
| ninl nfor nsv | k it fits best. B rmation. If mor wer every ques | | curate as possibl ach a separate sl | e. If two neet to ti | mari his fo | ried people orm. On the | are filine top of a | g together, both ar any additional page | e equally resp | oonsible for s | upply | ing correct |
| | | Each Residence, Build | | | | | | | | | | |
| . D | o you own or h | nave any legal or equit | able interest in a | ny resid | dence | , building, l | land, or | similar property? | | | | |
| | No. Go to Par | t 2. | | | | | | | | | | |
| | Yes. Where is | s the property? | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| 1.1 | | | | What | t is th | e property | ? Check a | all that apply | | | | |
| | 17655 Roi | | | | Sin | gle-family h | iome | | | | | or exemptions. Put |
| | Street address, | if available, or other descrip | otion | | Du | plex or multi | i-unit bui | lding | | | | ims on Schedule D: ecured by Property. |
| | | | | | l Co | ndominium (| or coope | rative | | | | , , , |
| | | | | | l Ma | nufactured o | or mobile | e home | | | | |
| | Corry | PA [*] | 16407-0000 | _ | Lar | nd | | | Current va entire pro | alue of the perty? | | urrent value of the ortion you own? |
| | City | State | ZIP Code | | I Inv | estment pro | perty | | • . | 95,000.00 | • | \$95,000.00 |
| | | | | | | neshare | | | Describe | the nature of | vour | ownership interest |
| | | | | | | | | | (such as f | iee simple, te | nancy | by the entireties, or |
| | | | | Who | | | in the p | roperty? Check one | Fee sim | te), if known. Inle | | |
| | Erie | | | | | btor 1 only btor 2 only | | | | ipic | | |
| | County | | | _ | | btor 1 and D | Ophtor 2 | anly | | | | |
| | , | | | _ | | | | ors and another | | k if this is constructions) | mmun | ity property |
| | | | | | | | | o add about this it | • | , | | |
| | | | | | | dentificatio | | | , | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| _ | A 1147 | | . <u>-</u> | | | | _ | | | | | |
| ۷. | Add the doll | ar value of the porti | ion vou own fo | r all of ' | vour | entries fr | rom Pai | rt 1. including an | ly entries fol | r | | |

pages you have attached for Part 1. Write that number here.....

\$95,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1 Case 19-10488-TPA Doc 14 Filed 05/30/19 Entered 05/30/19 13:26:52 Desc Main Document Page 4 of 49

| | | | | | Case number (if known) | 19-104 | 88 |
|--------------|--|---------------|------------------------|--|--------------------------------------|------------------|--|
| 3. Ca | rs, vans, | trucks, trac | tors, sport utility ve | hicles, motorcycles | | | |
| | No | | | | | | |
| ■, | Yes | | | | | | |
| | | | | | D | | |
| 3.1 | Make: | | | | | | s or exemptions. Put aims on Schedule D: |
| | Model: | | | | Creditors Who H | ave Claims | Secured by Property. |
| | | | 120000 | - | Current value of | | urrent value of the |
| | | _ | 130000 | | entire property? | ' p | ortion you own? |
| | | | Poute 89 Corry | At least one of the debtors and another | | | |
| | Model: 1500 Year: 2014 Approximate mileage: 130000 Other information: Debtor 2 only Location: 17655 Route 89, Corry PA 16407 Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | \$13,11 | 8.00 | \$13,118.00 | | | |
| 2.0 | Makai | Ford | | Who has an interest in the granesty? | Do not deduct se | cured claim | s or exemptions. Put |
| 3.2 | | | | _ | the amount of an | y secured cl | aims on Schedule D: |
| | | | | | Creditors with H | ave Claims | Secured by Property. |
| | | | 130000 | · | Current value of entire property? | | urrent value of the ortion you own? |
| | • • • | J | | <u> </u> | chare property. | P | ortion you own: |
| | Location | on: 17655 F | Route 89, Corry | | | | |
| | PA 164 | 107 | | * * * * | \$18,00 | 0.00 | \$18,000.00 |
| .pa | iges you | have attache | ed for Part 2. Write | that number here | | | \$31,118.00 |
| Do y | ou own o | or have any l | egal or equitable in | terest in any of the following items? | | por Do | rent value of the tion you own? not deduct secured ms or exemptions. |
| E> | <i>(amples:</i> No | Major applian | | , china, kitchenware | | | · |
| | | | House hold goo | .de | | | |
| | | | | i Route 89, Corry PA 16407 | | | \$3,000.00 |
| <i>E</i> > | No | Televisions a | | eo, stereo, and digital equipment; computers, p | printers, scanners; music | collections | ; electronic devices |
| | | | 3 TVs 4 iDads | BluBay gaming system lanton 2 sms | rtnhones | | |
| | | | | BluRay, gaming system, laptop, 2 sma Route 89, Corry PA 16407 | rpilolies | | \$2,800.00 |

Official Form 106A/B Schedule A/B: Property page 2

Case 19-10488-TPA Doc 14 Filed 05/30/19 Entered 05/30/19 13:26:52 Page 5 of 49 Document Debtor 1 Robert J Flood 19-10488 Valerie A Flood Case number (if known) Debtor 2 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Men's and women's clothing \$550.00 Location: 17655 Route 89, Corry PA 16407 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... Wedding bands \$1,000.00 Location: 17655 Route 89, Corry PA 16407 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... dog \$0.00 Location: 17655 Route 89, Corry PA 16407 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$7,350.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

Official Form 106A/B Schedule A/B: Property page 3

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| | ebtor 2 Valerie A I | | | Case number (iii | if known) 19-10488 |
|-----|--|-----------------------------|--|--|--------------------------------------|
| | | | | ints; certificates of deposit; shares in credit unions, brol with the same institution, list each. | kerage houses, and other similar |
| | Yes | | | Institution name: | |
| | | 17.1. | Checking | PNC Bank | \$693.58 |
| | | 17.2. | Savings | PNC Bank | \$200.08 |
| | | 17.3. | Credit Union | PSECU | \$5.00 |
| 18. | Bonds, mutual fund Examples: Bond fund ■ No | | | erage firms, money market accounts | |
| | ☐ Yes | | Institution or issuer na | ame: | |
| | Non-publicly traded joint venture No | stock and | interests in incorpor | ated and unincorporated businesses, including an | interest in an LLC, partnership, and |
| | ☐ Yes. Give specific | | about them me of entity: | % of ownership | ip: |
| | Negotiable instrumer | nts include uments are | personal checks, cash those you cannot tran | able and non-negotiable instruments iers' checks, promissory notes, and money orders. sfer to someone by signing or delivering them. | |
| | | | uer name: | | |
| | Retirement or pensi Examples: Interests ☐ No | | | 3(b), thrift savings accounts, or other pension or profit- | -sharing plans |
| | Yes. List each acco | | tely. of account: | Institution name: | |
| | | 401(| k) | unknown | \$382.26 |
| | | ised deposi | ts you have made so t | hat you may continue service or use from a company ublic utilities (electric, gas, water), telecommunications Institution name or individual: | companies, or others |
| | | | dia | to you, either for life or for a number of years) | |
| | ■ No | · | , , | to you, either for life or for a number of years) | |
| | ☐ Yes | Issuer nam | ne and description. | | |
| | Interests in an educa 26 U.S.C. §§ 530(b)(1 ■ No | | | alified ABLE program, or under a qualified state tui | ition program. |
| | ☐ Yes | Institution | name and description. | Separately file the records of any interests.11 U.S.C. § | § 521(c): |
| 25. | Trusts, equitable or ■ No | future inte | rests in property (otl | ner than anything listed in line 1), and rights or pow | vers exercisable for your benefit |
| | ☐ Yes. Give specific | information | about them | | |

Official Form 106A/B Schedule A/B: Property page 4

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| | ebtor 1 ebtor 2 | Robert J I Valerie A | | | Case number | er (if known) | 19-10488 |
|-----|--------------------|-----------------------------------|---|---|--|------------------|--|
| 26. | | | | ecrets, and other intellers, proceeds from royalties | ctual property s and licensing agreements | | |
| | | Give specific | information about then | n | | | |
| | Examµ ■ No | oles: Building | es, and other general in permits, exclusive licent information about them | ses, cooperative associa | ition holdings, liquor licenses, profess | ional licenses | |
| | | property owe | | | | | Current value of the |
| | , | proposition of | | | | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax ref ■ No | funds owed t | o you | | | | |
| | _ | Give specific | information about them | n, including whether you | already filed the returns and the tax ye | ars | |
| 29. | | support ples: Past due | or lump sum alimony, | spousal support, child su | pport, maintenance, divorce settleme | nt, property se | ettlement |
| | ☐ Yes. | Give specific | information | | | | |
| 30. | | <i>ples:</i> Unpaid w | neone owes you /ages, disability insurar unpaid loans you mad | | penefits, sick pay, vacation pay, work | ers' compens | ation, Social Security |
| | _ | Give specific | information | | | | |
| 31. | | sts in insuran ples: Health, d | | ce; health savings accou | nt (HSA); credit, homeowner's, or rent | er's insurance | е |
| | _ | Name the ins | urance company of eac Company nan | ch policy and list its value ne: | Beneficiary: | | Surrender or refund value: |
| | If you a some of | | ciary of a living trust, ex | rom someone who has xpect proceeds from a lif | died e insurance policy, or are currently ent | titled to receiv | ve property because |
| 33. | | | | not you have filed a law s, insurance claims, or riç | suit or made a demand for paymen thts to sue | t | |
| | _ | Describe eac | h claim | | | | |
| 34. | Other o | contingent ar | nd unliquidated claim | s of every nature, inclu | ding counterclaims of the debtor ar | nd rights to s | et off claims |
| | | Describe eac | h claim | | | | |
| 35. | _ | nancial assets | s you did not already | list | | | |
| | ■ No □ Yes. | Give specific | information | | | | |
| 36 | | | | | g any entries for pages you have att | | \$1,280.92 |

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Case 19-10488-TPA Doc 14 Filed 05/30/19 Entered 05/30/19 13:26:52 Page 8 of 49 Document Debtor 1 Robert J Flood Case number (if known) 19-10488 Valerie A Flood Debtor 2 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$95,000.00 Part 2: Total vehicles, line 5 \$31,118.00 57. Part 3: Total personal and household items, line 15 \$7,350.00 58. Part 4: Total financial assets, line 36 \$1,280.92 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00

\$39,748.92

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 6

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$39,748.92

\$134,748.92

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| | | | 311 1 111112 3 171 3 3 | |
|---------------------|--------------------------|--------------------|------------------------|------------------------------------|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Robert J Flood | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Valerie A Flood | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | WESTERN DISTRICT O | DF PENNSYLVANIA | |
| Case number | 19-10488 | | | |
| (if known) | | | | Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

| | ☐ You are claiming state and federal nonban | kruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | | | |
|----|---|--------------------------------------|-----------------|---|------------------------------------|--|--|
| | ■ You are claiming federal exemptions. 11 l | U.S.C. § 522(b)(2) | | | | | |
| 2. | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | portion you own | | Specific laws that allow exemption | | |
| | | Copy the value from Schedule A/B | Crie | ck only one box for each exemption. | | | |
| | 17655 Route 89 Corry, PA 16407 Erie County | \$95,000.00 | | \$9,661.00 | 11 U.S.C. § 522(d)(1) | | |
| | Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | House hold goods Location: 17655 Route 89, Corry PA | \$3,000.00 | | \$3,000.00 | 11 U.S.C. § 522(d)(3) | | |
| | 16407 Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | 3 TVs, 4 iPads, BluRay, gaming | \$2,800.00 | | \$2,800.00 | 11 U.S.C. § 522(d)(3) | | |
| | system, laptop, 2 smartphones Location: 17655 Route 89, Corry PA 16407 Line from <i>Schedule A/B</i> : 7.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | Men's and women's clothing Location: 17655 Route 89, Corry PA | \$550.00 | • | \$550.00 | 11 U.S.C. § 522(d)(3) | | |
| | 16407 Line from Schedule A/B: 11.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | Wedding bands Location: 17655 Route 89, Corry PA | \$1,000.00 | | \$1,000.00 | 11 U.S.C. § 522(d)(4) | | |
| | 16407 Line from Schedule A/B: 12.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | | | | | | | |

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19-10488 Valerie A Flood Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Checking: PNC Bank** 11 U.S.C. § 522(d)(5) \$693.58 \$693.58 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: PNC Bank 11 U.S.C. § 522(d)(5) \$200.08 \$200.08 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit **Credit Union: PSECU** 11 U.S.C. § 522(d)(5) \$5.00 \$5.00 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit 401(k): unknown 11 U.S.C. § 522(d)(12) \$382.26 \$382.26 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? Yes

Debtor 1

| | Case 19-10466-17/ | Document Page 11 | of 49 | 13.20.52 Des | oc Main |
|----------------|---|---|---|--|-----------------------------------|
| Filli | in this information to identify yo | | | | |
| Deb | tor 1 Robert J Flood | Middle Name Last Name | | | |
| | tor 2 Valerie A Floor use if, filing) First Name | Middle Name Last Name | | - | |
| Unit | ed States Bankruptcy Court for the | e: WESTERN DISTRICT OF PENNSYLVANIA | | | |
| Cas (if kno | e number 19-10488 | | | | if this is an ded filing |
| | <u>icial Form 106D</u> hedule D: Creditor | s Who Have Claims Secured | d by Propert | У | 12/15 |
| s nee numb | eded, copy the Additional Page, fill i per (if known). any creditors have claims secured — | . If two married people are filing together, both are eq t out, number the entries, and attach it to this form. On by your property? this form to the court with your other schedules. You | n the top of any additio | nal pages, write your na | |
| | Yes. Fill in all of the information | n below. | | | |
| Part | 1: List All Secured Claims | | | | |
| for e | ach claim. If more than one creditor ha | s more than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. As tical order according to the creditor's name. | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 | PSECU | Describe the property that secures the claim: | \$25,480.00 | \$18,000.00 | \$7,480.00 |
| | Attention: Bankruptcy Po Box 67013 Harrisburg, PA 17106 Number, Street, City, State & Zip Code | 2013 Ford Explorer 130000 miles Location: 17655 Route 89, Corry PA 16407 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated | | | |
| Who | o owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| | Pebtor 1 only | An agreement you made (such as mortgage or sec | cured | | |
| _ | Pebtor 2 only | car loan) | | | |
| | Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| _ | at least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| \Box | heck if this claim relates to a | Other (including a right to offset) | | | |

Opened 02/16 Last

Active

Date debt was incurred 4/10/19

community debt

Last 4 digits of account number

0013

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| Debtor 1 | | | | Case | number (if known) | 19-10488 | |
|----------------|--|--------------------------------------|--|-----------------|------------------------|-------------|------------|
| D - l- (0 | First Name | Middle Na | me Last Name | | | | |
| Debtor 2 | Valerie A I | Flood Middle Na | me Last Name | | | | |
| | FIISt Name | Wildule Na | ane Last Name | | | | |
| 2.2 P S | ECU | | Describe the property that secures the c | laim: | \$18,407.00 | \$13,118.00 | \$5,289.00 |
| Credit | tor's Name | | 2014 RAM 1500 130000 miles | | | | |
| Po Har | ention: Ban Box 67013 risburg, P <i>l</i> | A 17106 | Location: 17655 Route 89, Corry 16407 As of the date you file, the claim is: Check apply. Contingent | | | | |
| Numb | per, Street, City, S | State & Zip Code | Unliquidated | | | | |
| Who owes | s the debt? C | Check one. | Disputed Nature of lien. Check all that apply. | | | | |
| Debtor | 2 only | | An agreement you made (such as morto car loan) | | | | |
| | 1 and Debtor 2 | = | Statutory lien (such as tax lien, mechan | ic's lien) | | | |
| ☐ Check | one of the dec if this claim re unity debt | otors and another | ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) | | | | |
| Date debt | was incurred | Opened 01/15 Last Active 04/19 | Last 4 digits of account number | 0011 | | | |
| | | an Services | Describe the property that secures the c | | \$85,339.00 | \$95,000.00 | \$0.00 |
| Cor | tor's Name responden t/Bankrupte | | 17655 Route 89 Corry, PA 16407 Erie County | 7 | | | |
| Po | Box 514387 Angeles, 0 | 7 | As of the date you file, the claim is: Checlapply. Contingent | k all that | | | |
| Numb | per, Street, City, S | State & Zip Code | ☐ Unliquidated | | | | |
| Who owes | s the debt? C | check one. | Disputed Nature of lien. Check all that apply. | | | | |
| ☐ Debtor | • | | An agreement you made (such as morto car loan) | gage or secured | | | |
| Debtor | 1 and Debtor 2 | ? only | ☐ Statutory lien (such as tax lien, mechan | ic's lien) | | | |
| ☐ At least | one of the deb | otors and another | ☐ Judgment lien from a lawsuit | | | | |
| | if this claim re unity debt | elates to a | Other (including a right to offset) | | | | |
| Date debt | was incurred | Opened 12/15 Last Active 04/19 | Last 4 digits of account number | 9074 | | | |
| | | | | | 0400 000 | | |
| If this is | | of your form, add | olumn A on this page. Write that number he dollar value totals from all pages. | nere: | \$129,226 \$129,226 | | |
| | | | | | | | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| Debtor 1 Robert J Flood First Name Middle Name Last Name Debtor 2 Valerie A Flood First Name United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA Case number (if known) The state of t | | Document Page | 13 of 4 | 19 | .20.02 | 30 Main | |
|--|--|---|--------------|-------------------------|--------------------|---------------------|------|
| Debtor 2 (Spouse if, filing) Debtor 2 (It known) Debtor 2 (It known) Debtor 2 (It known) Debtor 3 Debtor 4 Debtor 4 Debtor 5 Debtor 4 Debtor 5 Debtor 4 Debtor 5 Debtor 6 Debtor 6 Debtor 6 Debtor 7 Debtor 7 Debtor 7 Debtor 7 Debtor 7 Debtor 8 Debtor 8 Debtor 9 Deb | Fill in this information to identify your case: | | | | | | |
| Debtor 2 (Spouse if, filing) Debtor 2 (It known) Debtor 2 (It known) Debtor 2 (It known) Debtor 3 Debtor 4 Debtor 4 Debtor 5 Debtor 4 Debtor 5 Debtor 4 Debtor 5 Debtor 6 Debtor 6 Debtor 6 Debtor 7 Debtor 7 Debtor 7 Debtor 7 Debtor 7 Debtor 8 Debtor 8 Debtor 9 Deb | Debtor 1 Robert J Flood | | | | | | |
| United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA Case number 19-10488 (if known) | 1100011011000 | le Name Last Nam | е | | | | |
| United States Bankruptcy Court for the: WESTERN DISTRICT OF PENNSYLVANIA Case number (if known) 19-10488 Check if this is a amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/11 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxe eff. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, writame and case number (if known). Part**: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the claims has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority pamounts. As much possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority amount amount amount amount priority creditor's Name Unknown When was the debt incurred? 5/15/2019 As of the date you file, the claim is: Check all that apply | Debtor 2 Valerie A Flood | | | | | | |
| Case number 19-10488 Check if this is a amended filing | (Spouse if, filing) First Name Middle | le Name Last Name | е | | | | |
| Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/1 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) Schedule G: Executory Contracts and Unexpired Leases (Official Form 106A/B). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxe left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Paperart 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority more under the continuation Paper 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority amount Annount Annount Annount Annount Annount | United States Bankruptcy Court for the: WESTEF | RN DISTRICT OF PENNSYLVA | NIA | | | | |
| Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/1 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other security contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) Schedule C: Executory Contracts and Unexpired Leases (Official Form 106A/B). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxe eft. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, writame and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Paperart 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority mount amount amount Nonprior amount Venue Callaban Priority Creditor's Name Unknown Number Street City State Zip Code When was the debt incurred? 5/15/2019 As of the date you file, the claim is: Check all that apply | Case number 19-10488 | | | | | | |
| Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 106A/D). Schedule 5: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxe eft. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, wriname and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim identify what type of claim it is. If a claim has both priority and nonpriority amounts. As much possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Lisa Callahan Priority Creditor's Name When was the debt incurred? When was the debt incurred? Mynamber Street City State Zip Code As of the date you file, the claim is: Check all that apply | | | | | _ | | |
| Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxe eft. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority mounts Nonprior amount Nonprior Street City State Zip Code As of the date you file, the claim is: Check all that apply | | | _ | | | 40/45 | |
| any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 106A/B) Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxe eft. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, writing and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Lisa Callahan Priority Creditor's Name When was the debt incurred? When was the debt incurred? When was the debt incurred? Myen was the debt incurred? S/15/2019 Myen was the debt incurred? Myen was the debt incurred? When was the debt incurred? S/15/2019 | Schedule E/F: Creditors Who Hav | /e Unsecured Claim | <u>s</u> | | | 12/15 | |
| 1. Do any creditors have priority unsecured claims against you? ☐ No. Go to Part 2. ☐ Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonprior amount Nonprior amount 2.1 Lisa Callahan Last 4 digits of account number 91W1 \$760.49 \$760.49 When was the debt incurred? 5/15/2019 When was the debt incurred? 5/15/2019 As of the date you file, the claim is: Check all that apply | Schedule D: Creditors Who Have Claims Secured by Pro eft. Attach the Continuation Page to this page. If you have | perty. If more space is needed, co | py the Part | you need, fill it out, | number the entries | s in the boxes on t | |
| No. Go to Part 2. | Part 1: List All of Your PRIORITY Unsecured C | laims | | | | | |
| 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority amount Nonprior amount Last 4 digits of account number 91W1 \$760.49 \$760.49 Priority Creditor's Name When was the debt incurred? 5/15/2019 When was the debt incurred? 5/15/2019 As of the date you file, the claim is: Check all that apply | Do any creditors have priority unsecured claims aga | ainst you? | | | | | |
| 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonprior amount 2.1 Lisa Callahan Priority Creditor's Name When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply | ☐ No. Go to Part 2. | | | | | | |
| 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonprior amount 2.1 Lisa Callahan Priority Creditor's Name When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply | Yes. | | | | | | |
| (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority amount Nonprior amount 2.1 Lisa Callahan Priority Creditor's Name When was the debt incurred? Number Street City State Zip Code As of the date you file, the claim is: Check all that apply | identify what type of claim it is. If a claim has both priorit possible, list the claims in alphabetical order according | ty and nonpriority amounts, list that on the creditor's name. If you have m | claim here a | nd show both priority a | nd nonpriority amo | unts. As much as | i, |
| 2.1 Lisa Callahan Priority Creditor's Name Unknown Number Street City State Zip Code Number Street City State Zip Code As of the date you file, the claim is: Check all that apply The company of the date of the claim is the c | (For an explanation of each type of claim, see the instru | actions for this form in the instruction | booklet.) | Total claim | | Nonpriority | |
| Priority Creditor's Name When was the debt incurred? 5/15/2019 unknown Number Street City State Zip Code As of the date you file, the claim is: Check all that apply | 2.1 Lisa Callahan | Last 4 digits of account number | 91W1 | \$760.49 | | | 0.00 |
| Number Street City State Zip Code As of the date you file, the claim is: Check all that apply | | Last 4 digits of account number | 31111 | | Ψ/00 | Ψ | .00 |
| Who is surround the debt0 O | unknown | When was the debt incurred? | 5/15/20 | 19 | - | | |
| Who incurred the debt? Check one. | | As of the date you file, the claim | is: Check a | ll that apply | | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | | |
| ■ Debtor 1 only □ Unliquidated | ■ Debtor 1 only | ☐ Unliquidated | | | | | |
| ☐ Debtor 2 only ☐ Disputed | ☐ Debtor 2 only | ☐ Disputed | | | | | |
| ☐ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: | ☐ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured cla | nim: | | | | |
| ☐ At least one of the debtors and another ☐ Domestic support obligations | ☐ At least one of the debtors and another | ■ Domestic support obligations | | | | | |
| ☐ Check if this claim is for a community debt ☐ Taxes and certain other debts you owe the government | ☐ Check if this claim is for a community debt | ☐ Taxes and certain other debts v | ou owe the | government | | | |
| Is the claim subject to offset? | - | | | • | | | |
| ■ No □ Other. Specify | ■ No | • | • | | | | |
| ☐ Yes Child Support | | Other, Specify | | | | | |

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| Debto | or 1 Robert J Flood or 2 Valerie A Flood | Doodmont 1 ago | Case numl | oer (if known) | 19-10488 | |
|----------|---|--|-------------------|-----------------------|--|-------------------------|
| 2.2 | NYS Child Support Processing Center | Last 4 digits of account number | 91W1 | \$760.49 | \$760 | 0.49 \$0.00 |
| | Priority Creditor's Name PO BOX 15368 | When was the debt incurred? | 5/15/2019 | | _ | |
| | Albany, NY 12212 Number Street City State Zip Code | As of the date you file, the claim | is: Check all the | at apply | | |
| , | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| | Debtor 1 only | ☐ Unliquidated | | | | |
| | Debtor 2 only | Disputed | | | | |
| | □ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured cla | ıim: | | | |
| | ☐ At least one of the debtors and another | ■ Domestic support obligations | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Taxes and certain other debts y | ou owe the gov | ernment | | |
| ı | s the claim subject to offset? | Claims for death or personal inj | • | | | |
| 1 | No | ☐ Other. Specify | | | | |
| | ☐ Yes | Child Supp | ort | | | |
| ur th | st all of your nonpriority unsecured claims in the isecured claim, list the creditor separately for each c an one creditor holds a particular claim, list the other art 2. | laim. For each claim listed, identify when | nat type of claim | it is. Do not list cl | aims already inclu laims fill out the C | uded in Part 1. If more |
| 4.1 | Caine & Weiner | Last 4 digits of account numb | er 0893 | | | \$186.00 |
| | Nonpriority Creditor's Name | | 0000 | | _ | Ψ100.00 |
| | Attn: Bankruptcy 5805 Sepulveda Blvd Sherman Oaks, CA 91411 | When was the debt incurred? | Opened | 2/27/17 | | |
| | Number Street City State Zip Code | As of the date you file, the cla | im is: Check all | that apply | | |
| | Who incurred the debt? Check one. | | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsec | ured claim: | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a s report as priority claims | eparation agree | ment or divorce the | nat you did not | |
| | No | Debts to pension or profit-sh | aring plans, and | l other similar deb | ts | |
| | ☐ Yes | Other. Specify 01 Progr | | | | |
| | □ 162 | Other. Specify | COSIVE IIISU | i ul i CC | | |

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Debtor 1 Robert J Flood

| Debto | r 2 Valerie A Flood | | Case number (if known) 19-10488 | | |
|-------|---|--|--|------------|--|
| 4.2 | Cavalry Portfolio Services Nonpriority Creditor's Name | Last 4 digits of account number | 8033 | \$3,698.00 | |
| | Attn: Bankruptcy Department 500 Summit Lake Ste 400 Valhalla, NY 10595 | When was the debt incurred? | Opened 07/17 Last Active 12/16 | | |
| | Number Street City State Zip Code | As of the date you file, the claim i | s: Check all that apply | | |
| | Who incurred the debt? Check one. | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | ☐ Yes | Other Specify Collection | Attorney Synchrony Bank | | |
| | | Other. Specify | | | |
| 4.3 | Cavalry Portfolio Services Nonpriority Creditor's Name | Last 4 digits of account number | 1238 | \$1,840.00 | |
| | Attn: Bankruptcy Department 500 Summit Lake Ste 400 Valhalla, NY 10595 | When was the debt incurred? | Opened 07/17 Last Active 12/16 | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community | Student loans | | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | ■ Other. Specify Collection | Attorney Synchrony Bank | | |
| 4.4 | Citibank | Last 4 digits of account number | 2542 | \$2,454.00 | |
| | Nonpriority Creditor's Name Attn: Recovery/Centralized Bankruptcy Po Box 790034 | When was the debt incurred? | Opened 07/16 Last Active 10/05/17 | | |
| | St Louis, MO 63179 | _ | | | |
| | Number Street City State Zip Code | As of the date you file, the claim | s: Check all that apply | | |
| | Who incurred the debt? Check one. | | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | | |
| | At least one of the debtors and another | Student loans | . Janii. | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | ration agreement or divorce that you did not | | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | ☐ Yes | Other Specify Credit Card | | | |
| | - - | - Other. Opedity | | | |

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| Debtor | 2 Valerie A Flood | | Case number (if known) | 19-10488 | | |
|--------|---|--|----------------------------------|-----------------|--------------|--|
| 4.5 | Discover Financial | Last 4 digits of account number | 7480 | | \$4,010.00 | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 15316 Wilmington, DE 19850 | When was the debt incurred? | Opened 07/14 Last 07/18 | Active | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce t | hat you did not | | |
| | No | ☐ Debts to pension or profit-sharing | g plans, and other similar deb | ots | | |
| | Yes | Other. Specify Credit Card | l | | | |
| 4.6 | FedLoan Servicing Nonpriority Creditor's Name | Last 4 digits of account number | 0015 | | \$137,947.00 | |
| | Attn: Bankruptcy Po Box 69184 Harrisburg, PA 17106 | When was the debt incurred? | Opened 11/18 Last 3/31/19 | Active | | |
| | Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | | | |
| | Who incurred the debt? Check one. | - | | | | |
| | Debtor 1 only | ☐ Contingent | | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce the | hat you did not | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar deb | ots | | |
| | ☐ Yes | ☐ Other. Specify | | | | |
| | | Educationa | ıl | | | |
| 4.7 | I C System Inc Nonpriority Creditor's Name | Last 4 digits of account number | 6260 | | \$50.00 | |
| | Attn: Bankruptcy P.O. Box 64378 | When was the debt incurred? | Opened 1/18/18 | | | |
| | St. Paul, MN 55164 Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | | | |
| | Who incurred the debt? Check one. | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce the | hat you did not | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar deb | ots | | |
| | □Yes | Other. Specify Medical | | | | |
| | — 103 | Utner. Specify | | | | |

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Debtor 1 Robert J Flood

| Debto | valerie A Flood | | Case number (if known) 19-10488 | | |
|-------|--|--|--|------------|--|
| 4.8 | MedCare Equipment Company, LLC Nonpriority Creditor's Name | Last 4 digits of account number | 0921 | Unknown | |
| | 104 Erie Central Mall Erie, PA 16501 | When was the debt incurred? | Unknown | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | Other. Specify Medical | | | |
| 4.9 | Midland Funding | Last 4 digits of account number | 7243 | \$1,941.00 | |
| | Nonpriority Creditor's Name | | Opened 05/49 Leet Active | | |
| | 2365 Northside Dr Ste 300 San Diego, CA 92108 | When was the debt incurred? | Opened 05/18 Last Active 09/17 | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | \square Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | ■ Other. Specify Factoring (| Company Account Citibank N.A. | | |
| 4.1 | Midland Funding | Last 4 digits of account number | 4783 | \$1,413.00 | |
| | Nonpriority Creditor's Name 2365 Northside Dr Ste 300 San Diego, CA 92108 | When was the debt incurred? | Opened 05/18 Last Active 09/17 | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | ■ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community | Student loans | | | |
| | debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | | |
| | ■ No | ☐ Debts to pension or profit-sharing | • • | | |
| | Yes | Other. Specify Factoring (| Company Account Citibank N.A. | | |

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Debtor 1 Robert J Flood

| Debte | or 2 Valerie A Flood | | Case number (if known) 19-10488 | | |
|----------|---|---|--|------------|--|
| 4.1 1 | Navient | Last 4 digits of account number | 4291 | \$8,258.00 | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9000 Wiles-Barr, PA 18773 | When was the debt incurred? | Opened 10/06 Last Active 04/19 | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Спеск ан tnat apply | | |
| | Debtor 1 only | Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | | |
| | Is the claim subject to offset? | report as priority claims | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | ☐ Yes | Other. Specify | | | |
| | | Educationa | <u>II</u> | | |
| 4.1 2 | P S E C U | Last 4 digits of account number | 0012 | \$1,096.00 | |
| | Nonpriority Creditor's Name Attention: Bankruptcy Po Box 67013 Harrisburg, PA 17106 | When was the debt incurred? | Opened 01/16 Last Active 4/10/19 | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | | |
| | No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | Yes | Other. Specify Unsecured | | | |
| 4.1 | Synchrony Bank/Lowes Nonpriority Creditor's Name | Last 4 digits of account number | 2558 | \$619.00 | |
| | Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 | When was the debt incurred? | Opened 12/15 Last Active 09/17 | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you did not | | |
| | Is the claim subject to offset? | report as priority claims | | | |
| | ■ No | Debts to pension or profit-sharin | • • | | |
| | ☐ Yes | Other. Specify Charge Acc | count | | |

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| Valerie A Flood | | Case number (if known) | 19-10488 | | |
|---|--|--------------------------------|------------------|-----------|--|
| Synchrony Bank/Walmart | Last 4 digits of account number | 8457 | | \$1,278.0 | |
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896 | When was the debt incurred? | Opened 04/14 Last 09/17 | t Active | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | |
| ☐ Debtor 1 only | ☐ Contingent | | | | |
| ■ Debtor 2 only | ☐ Unliquidated | | | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce | that you did not | | |
| ■ No | Debts to pension or profit-sharing | ig plans, and other similar de | ebts | | |
| Yes | Other. Specify Charge Acc | count | | | |
| UPMC Health Services | Last 4 digits of account number | unknown | | Unknov | |
| Nonpriority Creditor's Name | _ | | | | |
| 2 Hot Metal St Dist. Room 386 Pittsburgh, PA 15203 | When was the debt incurred? | unknown | | | |
| Number Street City State Zip Code | As of the date you file, the claim | is: Check all that apply | | | |
| Who incurred the debt? Check one. | | | | | |
| Debtor 1 only | ☐ Contingent | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce | that you did not | | |
| ■ No | Debts to pension or profit-sharing | ig plans, and other similar de | ebts | | |
| Yes | Other. Specify Medical Ex | penses | | | |
| Wf/fmg | Last 4 digits of account number | 3373 | | \$305. | |
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 51193 | When was the debt incurred? | Opened 03/15 Las: 04/19 | t Active | | |
| Los Angeles, CA 90051 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | |
| Debtor 1 only | ☐ Contingent | | | | |
| Debtor 2 only | ☐ Unliquidated | | | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | |
| ☐ Check if this claim is for a community | ☐ Student loans | | | | |
| debt | Obligations arising out of a sepa | aration agreement or divorce | that you did not | | |
| Is the claim subject to offset? | report as priority claims | | | | |
| ■ No | Debts to pension or profit-sharing | | ebts | | |
| ☐ Yes | ■ Other. Specify Charge Acc | count | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

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| Debtor 2 Val | erie A | Flood | | Case nu | umber (if known) | 19-10488 | |
|----------------------------------|-----------------------|-------------------------------|--|---------------|-----------------------|--------------------------|----------------------|
| is trying to co have more tha | llect fro an one c | m you for a debt you owe to | ed about your bankruptcy, for a debt that o someone else, list the original creditor that you listed in Parts 1 or 2, list the ac ut or submit this page. | in Parts 1 | or 2, then list the | collection agency here | e. Similarly, if you |
| Name and Addre | ess | | On which entry in Part 1 or Part 2 did y | ou list the o | riginal creditor? | | |
| Daniel Santu | ıcci | | Line 4.10 of (Check one): | | • | ity Unsecured Claims | |
| Midland Fun | ıdina L | .LC | | | | priority Unsecured Claim | _ |
| 1 Internation | | | | ■ Part 2: | Creditors with Nonp | priority Unsecured Claim | S |
| Philadelphia | | | | | | | |
| · ·····aao.p····a | ., | | Last 4 digits of account number | 20 | 019 | | |
| Name and Addre | | | On which entry in Bort 1 or Bort 2 did y | ou list the o | riginal araditar? | | |
| Scott Morns | | | On which entry in Part 1 or Part 2 did y Line 4.4 of (Check one): | | - | | |
| RAS LaVra L | | | Line 4.4 of (Check one): | | | ity Unsecured Claims | |
| | _ | Sur Cuito 450 | | Part 2: | Creditors with Nonp | oriority Unsecured Claim | S |
| Fort Washin | | ve Suite 150 PΔ 19034 | | | | | |
| TOTE WASHING | gion, | A 1000- | Last 4 digits of account number | ty | PA | | |
| Name and Addre | ess | | On which entry in Part 1 or Part 2 did y | ou list the o | riginal creditor? | | |
| The Honoral | ble De | nise Marie Buell | Line 4.10 of (Check one): | ☐ Part 1: 0 | Creditors with Priori | ity Unsecured Claims | |
| 732 Worth S | treet | | | | | oriority Unsecured Claim | ie. |
| Corry, PA 16 | 6407 | | | _ r an 2. | Croditoro With Honp | monty encodered elain | • |
| | | | Last 4 digits of account number | | | | |
| Name and Addre | ess | | On which entry in Part 1 or Part 2 did y | ou list the o | riginal creditor? | | |
| Tsarouhis La | aw Gr | oup | Line 4.2 of (Check one): | ☐ Part 1: 0 | Creditors with Priori | ity Unsecured Claims | |
| 21 S 9th Stre | eet | | | Part 2: | Creditors with Nonn | riority Unsecured Claim | ie. |
| Suite 200 | | | | — T alt 2. | Creditors with Nonp | monty onsecured claim | 3 |
| Allentown, F | PA 181 | 02 | | | | | |
| | | | Last 4 digits of account number | ty | PA | | |
| Name and Addre | ess | | On which entry in Part 1 or Part 2 did y | ou list the o | riginal creditor? | | |
| Tsarouhis La | aw Gr | oup | Line 4.3 of (Check one): | | • | ity Unsecured Claims | |
| 21 S 9th Stre | eet | • | | | | priority Unsecured Claim | _ |
| Suite 200 | | | | ■ Paπ 2: | Creditors with Nonp | oriority Unsecured Claim | S |
| Allentown, F | PA 181 | 02 | | | | | |
| | | | Last 4 digits of account number | ty | PA | | |
| Name and Addre | ess | | On which entry in Part 1 or Part 2 did y | ou list the o | riginal creditor? | | |
| Weltman We | einberg | g & Reis | Line 4.5 of (Check one): | ☐ Part 1: 0 | Creditors with Priori | ity Unsecured Claims | |
| 436 7th Avei | nue | | | Part 2: | Creditors with Nonp | oriority Unsecured Claim | ıS |
| Suite 2500 | | | | | | , | |
| Pittsburgh, I | PA 152 | 219 | Last 4 digits of account number | 0.0 | 040 | | |
| | | | Last 4 digits of account number | 20 | 019 | | |
| Part 4: Add | I the Ar | nounts for Each Type of | Unsecured Claim | | | | |
| 6. Total the amo type of unsec | | | claims. This information is for statistica | I reporting | purposes only. 28 | 3 U.S.C. §159. Add the | amounts for each |
| | | | | | Total | Claim | |
| | 6a. | Domestic support obligat | ions | 6a. | \$ | 1,520.98 | |
| Total | | | | | | , | |
| claims | 01 | Tanana and as solved as | all the same that are a second | CI | | | |
| from Part 1 | 6b. | | ebts you owe the government | 6b. | \$ | 0.00 | |
| | 6c. | = | nal injury while you were intoxicated | 6c. | \$ | 0.00 | |
| | 6d. | Other. Add all other priority | unsecured claims. Write that amount here. | . 6d. | \$ | 0.00 | |
| | | | | | | | |
| | 6e. | Total Priority. Add lines 6a | through 6d. | 6e. | \$ | 1,520.98 | |
| | | | | | | | |
| | C.f | Student loans | | C.f | | Claim | |
| | 6f. | Gradelir Idaila | | 6f. | \$ | 146,205.00 | |

Official Form 106 E/F

Total claims

from Part 2

6g.

6h.

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

0.00

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Debtor 1 Debtor 2 Robert J Flood Valerie A Flood Case number (if known) 19-10488

6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ 165,095.00

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| | | | 1 000 22 01 43 | |
|---------------------|--------------------------|--------------------|----------------------------------|-----------------------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Robert J Flood | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Valerie A Flood | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | WESTERN DISTRICT O | WESTERN DISTRICT OF PENNSYLVANIA | |
| Case number | 19-10488 | | | |
| (if known) | | | | ☐ Check if this is amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | whom you have the | e contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|-------------------|---------------------|---|
| 2.1 | | , | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | <u> </u> |
| 2.4 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |

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| | | Document | Page 23 of | 49 | |
|---------------------------------|--|---|----------------------|---|------------------------------------|
| Fill in this info | rmation to identify your o | ase: | | | |
| Debtor 1 | Robert J Flood | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | Valerie A Flood First Name | Middle Name | Last Name | | |
| | Bankruptcy Court for the: | WESTERN DISTRICT OF F | | | |
| Case number | 19-10488 | | | | |
| (if known) | | | | | Check if this is an amended filing |
| | | | | | amended ming |
| Official F | orm 106H | | | | |
| Schedul | e H: Your Code | ebtors | | | 12/15 |
| 1. Do you □ No ■ Yes | , , | ou are filing a joint case, do n | · | | |
| | | lived in a community prope Nevada, New Mexico, Puerto | | ? (Community property states and gton, and Wisconsin.) | d territories include |
| ■ No. Go t | | se, or legal equivalent live wit | h you at the time? | | |
| in line 2 aç | gain as a codebtor only if D), Schedule E/F (Official | that person is a guarantor | or cosigner. Make su | your spouse is filing with you. ire you have listed the creditor G). Use Schedule D, Schedule I | on Schedule D (Official |
| | mn 1: Your codebtor Number, Street, City, State and ZIF | Code | | Column 2: The creditor to wl Check all schedules that apply | - |
| 3.1 Mid l | and Funding | | | ☐ Schedule D, line | |
| 1 Int Phil | ernational Plaza 5th Fl adelphia, PA 19113 ding Docket 75-2019 | oor | | Schedule E/F, line 4. Schedule G Midland Funding | 9 |

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| Fill | in this information to identify your c | ase: | | |
|------|--|---------------------------|--|---|
| Del | otor 1 Robert J Flo | ood | | |
| | otor 2 use, if filing) Valerie A Flo | ood | | |
| Uni | ted States Bankruptcy Court for the | e: WESTERN DISTRIC | T OF PENNSYLVANIA | |
| | se number 19-10488 | | - | Check if this is: ☐ An amended filing |
| | | | | A supplement showing postpetition chapter 13 income as of the following date: |
| | fficial Form 106I | | | MM / DD/ YYYY |
| S | chedule I: Your Inc | ome | | 12/15 |
| spo | use. If you are separated and you ch a separate sheet to this form. | ır spouse is not filing w | ith you, do not include informati | ring with you, include information about your on about your spouse. If more space is needed, d case number (if known). Answer every question. |
| 1. | Fill in your employment information. | | Debtor 1 | Debtor 2 or non-filing spouse |
| | If you have more than one job, | Employment status | ■ Employed | ■ Employed |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | ☐ Not employed |
| | employers. | Occupation | Operations Manager | _Facilitator |
| | Include part-time, seasonal, or self-employed work. | Employer's name | One Ten Corporation | Union City Family Support Center |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 3939 West Ridge Road Erie, PA 16506 | 38 North Main Street Union City, PA 16438 |
| | | How long employed t | here? 6 years | 1 year |

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

4. Calculate gross Income. Add line 2 + line 3.

Estimate and list monthly overtime pay.

| non-f | For Debtor 1 | | |
|-------|--------------|-----------------------|-----------------------------|
| \$ | 4,465.07 | \$ | 2. |
| +\$_ | 0.00 | +\$ | 3. |
| \$_ | 4,465.07 | \$ | 4. |
| = | * | 4,465.07 \$ 0.00 +\$ | \$ 4,465.07 \$ +\$ 0.00 +\$ |

For Dobton 4 For Dobton 2 or

Official Form 106I Schedule I: Your Income page 1

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| Debi | tor 1 tor 2 | Robert J Flood Valerie A Flood | _ | (| Case | number (if known) | 19- | -10488 | | |
|------|-------------------------------|--|-----------|----------------|-------------------|-------------------|------|--------------------------|-------------|-----------------|
| | Сор | y line 4 here | 4. | | For | Debtor 1 4,465.07 | | or Debtor on-filing s | | |
| 5. | Lict | all payroll deductions: | | | | | • | | | - |
| J. | 5a. | Tax, Medicare, and Social Security deductions | 5a | | \$ | 825.13 | \$ | | 646.17 | |
| | 5b. | Mandatory contributions for retirement plans | 5b | | \$ - | 0.00 | \$ | | 0.00 | - |
| | 5c. | Voluntary contributions for retirement plans | 50 | | <u> </u> | 89.31 | \$ | | 0.00 | |
| | 5d. | Required repayments of retirement fund loans | 5d | ı. | \$ | 0.00 | \$ | | 0.00 | - |
| | 5e. | Insurance | 5e | €. | \$_ | 412.04 | \$ | | 126.19 | |
| | 5f. | Domestic support obligations | 5f. | | \$ | 520.00 | \$ | | 0.00 | - - |
| | 5g. | Union dues | 5g | | \$_ | 0.00 | \$ | | 0.00 | |
| | 5h. | Other deductions. Specify: HRA | _ 5h | 1.+ | \$_ | 86.67 | + \$ | | 0.00 | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$_ | 1,933.15 | \$ | | 772.36 | |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$_ | 2,531.92 | \$ | 2 | ,561.01 | = |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a | . | \$ | 0.00 | \$ | | 0.00 | |
| | 8b. | Interest and dividends | 8b | | \$ - | 0.00 | \$ | | 0.00 | - |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 80 | 2. | * _ \$ | 0.00 | \$ | | 0.00 | - |
| | 8d. | Unemployment compensation | 8d | | \$_ | 0.00 | \$ | | 0.00 | - |
| | 8e. | Social Security | 8e |) . | \$ | 0.00 | \$ | | 0.00 | |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | 8f. 8g | J. | \$_ \$_ \$_ | 0.00 0.00 | \$ | | 0.00 | |
| | 8h. | Other monthly income. Specify: | _ 011 | ۱.+ | Ф _ | 0.00 | + \$ | | 0.00 | - |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | 5 | . | 0.00 | \$ | | 0.00 |) |
| 10 | Cald | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 2,531.92 + \$ | | 2,561.01 | = \$ | 5,092.93 |
| 10. | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | Ψ_ | | 2,331.92 + V | | .,301.01 | | 3,032.33 |
| 11. | Stat Inclu othe Do r | the all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not cify: | depe | | | . • | • | Schedule | e J. +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies | | | | | | | \$ | 5,092.93 |
| 13. | Doy | you expect an increase or decrease within the year after you file this form | ? | | | | | | Combin | ned y income |
| | | No. | | | | | | | | |
| | П | Yes. Explain: | | | | | | | | |

Official Form 106l Schedule I: Your Income page 2

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| | | | | | | _ | | |
|--------|----------------------------|------------------------------------|----------------|--|---|---------------|--------------------|---|
| Fill | in this informa | tion to identify yo | our case: | | | | | |
| Deb | tor 1 | Robert J Flo | od | | | Chec | k if this is: | |
| | | | | | | _ | An amended filing | |
| | tor 2 | Valerie A Flo | ood | | | | | ving postpetition chapter the following date: |
| (Spc | ouse, if filing) | | | | | | 10 expenses as or | the following date. |
| Unite | ed States Bankr | uptcy Court for the | : WESTE | ERN DISTRICT OF PENNS | SYLVANIA | _ | MM / DD / YYYY | |
| Case | e number 19 | 9-10488 | | | | | | |
| (If kr | nown) | | | | | | | |
| | ficial Ec | rm 106 l | | | | 1 | | |
| | | rm 106J | | | | | | |
| | | J: Your | | | - Clim of a mathematic | | | 12/15 |
| info | rmation. If m | | eded, atta | . If two married people ar ch another sheet to this n. | | | | |
| Part | 11: Descr | ibe Your House | ehold | | | | | |
| 1. | Is this a joir | | | | | | | |
| | ☐ No. Go to | line 2. | | | | | | |
| | Yes. Doe | s Debtor 2 live | in a separ | ate household? | | | | |
| | ■ N | 0 | | | | | | |
| | | | st file Offici | al Form 106J-2, Expenses | for Separate House | ehold of Debt | or 2. | |
| 2. | Do you have | e dependents? | □ No | | | | | |
| ۷. | • | • | | En | B 1 | | 5 | Barrier Investor |
| | Do not list D Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relate Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | D | d | | | | | | □ No |
| | Do not state dependents | | | | Son | | 3 | ■ Yes |
| | | | | | | | | □ No |
| | | | | | Daughter | | 3 | Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| • | D | | | | | | | ☐ Yes |
| 3. | , , | penses include f people other t | han | No | | | | |
| | | d your depende | | Yes | | | | |
| Part | 2: Estim | ate Your Ongoi | na Monthi | ly Fynenses | | | | |
| Esti | imate your ex | cpenses as of you | our bankrı | uptcy filing date unless y y is filed. If this is a supp | | | | |
| Incl | ude expense | s paid for with | non-cash | government assistance i | f vou know | | | |
| the | value of sucl | h assistance an | | cluded it on Schedule I: Y | | | V | |
| (Off | icial Form 10 |)6l.) | | | | | Your exp | enses |
| 4. | The rental of | r homo ownore | hin ovnon | ses for your residence. | naluda firat martaga | • | | |
| 4. | | nd any rent for th | | | nciude ilist mortgagi | 4. \$ | | 700.00 |
| | If not includ | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | | 0.00 |
| | | rty, homeowner's | s, or renter | 's insurance | | 4a. \$ | | 0.00 |
| | | • | | ıpkeep expenses | | 4c. \$ | | 150.00 |
| _ | | owner's associat | | | | 4d. \$ | | 0.00 |
| 5. | Additional r | nortgage payme | ents for yo | our residence, such as ho | me equity loans | 5. \$ | | 0.00 |

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| ebtor 1 | Robert J Flood | | 40.40400 |
|---------|---|-----------------------------|-------------------------------|
| ebtor 2 | Valerie A Flood | Case number (if known) | 19-10488 |
| i. Util | ities: | | |
| 6a. | Electricity, heat, natural gas | 6a. \$ | 250.00 |
| 6b. | Water, sewer, garbage collection | 6b. \$ | 0.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. \$ | 290.00 |
| 6d. | Other. Specify: | 6d. \$ | 0.00 |
| Foo | od and housekeeping supplies | 7. \$ | 1,100.00 |
| | Idcare and children's education costs | 8. \$ | 700.00 |
| - | thing, laundry, and dry cleaning | 9. \$ | 300.00 |
| | sonal care products and services | 10. \$ | 150.00 |
| | dical and dental expenses | 11. \$ | 200.00 |
| | nsportation. Include gas, maintenance, bus or train fare. | π. ψ | 200.00 |
| | not include car payments. | 12. \$ | 350.00 |
| | ertainment, clubs, recreation, newspapers, magazines, and books | 13. \$ | 150.00 |
| | aritable contributions and religious donations | 14. \$ | 0.00 |
| | urance. | | 0.00 |
| | not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | . Life insurance | 15a. \$ | 10.00 |
| 15b | . Health insurance | 15b. \$ | 0.00 |
| 15c | . Vehicle insurance | 15c. \$ | 189.00 |
| 15d | . Other insurance. Specify: | 15d. \$ | 0.00 |
| | es. Do not include taxes deducted from your pay or included in lines 4 or 20. | | |
| | ecify: | 16. \$ | 0.00 |
| | allment or lease payments: | <u> </u> | |
| 17a | . Car payments for Vehicle 1 | 17a. \$ | 547.83 |
| 17b | . Car payments for Vehicle 2 | 17b. \$ | 0.00 |
| 17c | . Other. Specify: | 17c. \$ | 0.00 |
| 17d | Other. Specify: | 17d. \$ | 0.00 |
| . Υοι | r payments of alimony, maintenance, and support that you did not repor | tas | 0.00 |
| | lucted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 10 | | 0.00 |
| | er payments you make to support others who do not live with you. | \$ | 0.00 |
| | ecify: | 19. | |
| | er real property expenses not included in lines 4 or 5 of this form or on S | | |
| | . Mortgages on other property | 20a. \$ | 0.00 |
| | Real estate taxes | 20b. \$ | 0.00 |
| | Property, homeowner's, or renter's insurance | 20c. \$ | 0.00 |
| | . Maintenance, repair, and upkeep expenses | 20d. \$ | 0.00 |
| | . Homeowner's association or condominium dues | 20e. \$ | 0.00 |
| . Oth | er: Specify: | 21+\$ | 0.00 |
| Cal | culate your monthly expenses | | |
| | . Add lines 4 through 21. | \$ | 5,086.83 |
| | . Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106 | | 0,000.00 |
| | | | F 000 00 |
| 22C | . Add line 22a and 22b. The result is your monthly expenses. | \$ | 5,086.83 |
| . Cal | culate your monthly net income. | | |
| 23a | . Copy line 12 (your combined monthly income) from Schedule I. | 23a. \$ | 5,092.93 |
| | Copy your monthly expenses from line 22c above. | 23b\$ | 5,086.83 |
| | | | -, |
| 23c | . Subtract your monthly expenses from your monthly income. | | 0.40 |
| | The result is your monthly net income. | 23c. \$ | 6.10 |
| _ | | | |
| | you expect an increase or decrease in your expenses within the year after | | araaa ar daar b |
| | example, do you expect to finish paying for your car loan within the year or do you expect lification to the terms of your mortgage? | your mortgage payment to in | crease or decrease because of |
| | | | |
| | | | |
| □ ` | Yes. Explain here: | | |

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| Fill in this in | formation to identify your | case: | | |
|---------------------|-----------------------------|---------------------------|---------------------------------------|---|
| Debtor 1 | Robert J Flood | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Valerie A Flood | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court for the: | WESTERN DISTRICT (| OF PENNSYLVANIA | |
| Case number | 19-10488 | | | |
| (if known) | | | | ☐ Check if this is an amended filing |
| Declar | ation About a | an Individual | Debtor's Schedul | es 12/15 |
| f two married | d people are filing togethe | r, both are equally respo | nsible for supplying correct informa | tion. |
| You must file | this form whenever you fi | ile bankruptcy schedules | or amended schedules. Making a fa | alse statement, concealing property, or |
| obtaining mo | | n connection with a bank | | \$250,000, or imprisonment for up to 20 |
| | | | | |
| | Sign Below | | | |
| Did you | nay or agree to nay some | one who is NOT an attor | ney to help you fill out bankruptcy f | orms? |
| Dia you | pay or agree to pay some | CONE WIND IS NOT AN AUDI | ney to help you hill out bankruptcy i | orinia: |

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and

Official Form 106Dec

No

☐ Yes. Name of person

that they are true and correct.

X /s/ Robert J Flood

Robert J Flood

Signature of Debtor 1

Date May 30, 2019

X /s/ Valerie A Flood

Valerie A Flood

Signature of Debtor 2

Date May 30, 2019

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

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| Fill in | this infor | nation to identify you | r case: | | | | | | |
|----------------|--|--|--|---|--|---|--|--|--|
| Debto | r 1 | Robert J Flood | | | | | | | |
| | | First Name | Middle Name | Last Name | | | | | |
| Debto | r 2 e if, filing) | Valerie A Flood First Name | Middle Name | Last Name | | | | | |
| | | | | | | | | | |
| United | d States Ba | nkruptcy Court for the: | WESTERN DISTRICT OF | FPENNSYLVANIA | | | | | |
| Case (if know) | _ | 19-10488 | | | _ | Check if this is an mended filing | | | |
| | | rm 107 of Financial | Affairs for Indivic | duals Filing for B | ankruptcy | 4/19 | | | |
| nform numbe | ation. If ner (if know | nore space is needed, n). Answer every que | attach a separate sheet to stion. | this form. On the top of any | equally responsible for sup | | | | |
| Part 1 | | Details About Your Ma r current marital statu | rital Status and Where You | Lived Before | | | | | |
| . | Married | l | | | | | | | |
| _ | | | | | | | | | |
| 2. D | uring the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | |
| | No Yes. Lis | st all of the places you I | ived in the last 3 years. Do no | ot include where you live now | ·. | | | | |
| C | Debtor 1 P | rior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | | | |
| | | | | | ity property state or territory co, Texas, Washington and V | | | | |
| | I No I Yes. Ma | ake sure vou fill out <i>Sch</i> | nedule H: Your Codebtors (Of | ficial Form 106H). | | | | | |
| Part 2 | | in the Sources of You | ` | , | | | | | |
| Fi | ill in the tot | al amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part- | | ndar years? | | | |
| | | I in the details. | | | | | | | |
| | | | Dobtov 4 | | Debter 2 | | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | | | |
| | • | of current year untiled for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$25,668.80 | ■ Wages, commissions, bonuses, tips | \$15,384.60 | | | |
| | | - - | ☐ Operating a business | | ☐ Operating a business | | | | |

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Debtor 1 Robert J Flood 19-10488 Valerie A Flood Case number (if known) Debtor 2 Debtor 1 Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$49,091.00 \$38,344.00 ■ Wages, commissions, Wages, commissions, (January 1 to December 31, 2018) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$49,091.00 \$38,344.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment **Total amount** Amount vou Was this payment for ... still owe paid

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| Debtor 1 Robert J Flood Debtor 2 Valerie A Flood | | | | Cas | e number (if known) | 19-10488 | | |
|--|------------------------|--|---|--|--|---|--|--|
| <i>Insid</i> of wh | | n 1 year before you filed for bankruptoers include your relatives; any general patch you are an officer, director, person in iness you operate as a sole proprietor. 1 my. | ortners; relatives of any gen- control, or owner of 20% of | eral partners; partner r more of their voting | erships of which you g securities; and ar | u are a general partner; corporations ny managing agent, including one for | | |
| | _ | No Yes. List all payments to an insider. | | | | | | |
| | | ler's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment | | |
| i | inside Includ | n 1 year before you filed for bankruptoer? le payments on debts guaranteed or cos | | ments or transfer a | nny property on ac | ccount of a debt that benefited an | | |
| ı | | Yes. List all payments to an insider | | | | | | |
| | Insid | ler's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name | | |
| Part | 4. | Identify Legal Actions, Repossession | ns, and Foreclosures | | | | | |
|] 1 | List al modifi | n 1 year before you filed for bankrupto Il such matters, including personal injury ications, and contract disputes. No Yes. Fill in the details. | | | | | | |
| | Case title Case number | | Nature of the case | Nature of the case Court or agency | | Status of the case | | |
| | Floo | and Funding LLC v. Robert J od 75-2019 | Collection | Magisterial Dis 06-2-04, Corr 732 Worth Stre Corry, PA 1640 | t | ■ Pending □ On appeal □ Concluded | | |
| | | alry SPV I LLC v. Valerie Flood 39-18 | Collection | Erie County Co Common Pleas 140 West 6th S Erie, PA 16501 | 5 | ■ Pending □ On appeal □ Concluded | | |
| - | | oank N.A. vs. Robert Flood 59.19 | Collection | Erie County Co Common Pleas 140 West 6th S Erie, PA 16501 | 5 | ■ Pending □ On appeal □ Concluded | | |
| | Rob | alry Portfolio Services vs. ert Flood 3-10568 | Collection | Erie County Co Common Pleas 140 West 6th S Erie, PA 16501 | 5 | ■ Pending □ On appeal □ Concluded | | |
| | | cover Bank v. Robert J Flood 110-2019 | Collection | Magisterial Dis 06-2-04, Corr 732 Worth Stre Corry, PA 1640 | t | ■ Pending □ On appeal □ Concluded | | |
| - | Midl | and Funding LLC v. Valerie | Collection | Magisterial Dis | trict Court | ■ Pending | | |

Flood

CV-48-2019

06-2-04, Corr

732 Worth Stret

Corry, PA 16407

☐ On appeal

☐ Concluded

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| | otor 2 Valerie A Flood | | Case number (i | 19-10 | 488 | | | | |
|-----|---|---|---|---------------------------|-----------------------------------|-------------------|--|--|--|
| | Case title | Nature of the case | Status | Status of the case | | | | | |
| | Case number Cavalry SPV I LLC v. Valarie Flood CV-62-2018 | Court or agency Collection Magisterial District Court 06-2-04, Corr 732 Worth Stret Corry, PA 16407 | | | ☐ Pending ☐ On appeal ■ Concluded | | | | |
| | Cavalry Spv I Lic vs ROBERT FLOOD 201810568 10589-18 | CIVIL JUDGMENT | Erie County Court of Common Pleas 140 West 6th Street Erie, PA 16501 | | nding appeal ancluded | | | | |
| 10. | Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. | | | | | | | | |
| | Creditor Name and Address | Describe the Property Explain what happened | Date | te Value pr | | | | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment became No Yes. Fill in the details. | luding a bank or financial inst | itution, set off | any amo | unts from your | | | | |
| | Creditor Name and Address | Date action was Am taken | | | | | | | |
| 12. | Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or all No Yes | | erty in the possession of an as | ssignee for the | benefit (| of creditors, a | | | |
| Par | t 5: List Certain Gifts and Contributions | | | | | | | | |
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. | | | | | | | | |
| | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and Address: | Describe the gifts | | Dates you ga the gifts | ve | Value | | | |
| 14. | Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or con- | | s or contributions with a total | value of more | than \$60 | 0 to any charity? | | | |
| | Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | | u contributed | Dates you contributed | | Value | | | |

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| | btor 2 Valerie A Flood Valerie A Flood | | Case number (if known) | 19-10488 | | | | |
|-----|--|--|-----------------------------------|---|--|--|--|--|
| Par | rt 6: List Certain Losses | | | | | | | |
| 15. | Within 1 year before you filed for bankrup or gambling? | ptcy or since you filed for bankruptcy, o | did you lose anything be | cause of theft, fire, other disaster, | | | | |
| | NoYes. Fill in the details. | | | | | | | |
| | Describe the property you lost and how the loss occurred | Describe any insurance coverage for to Include the amount that insurance has painsurance claims on line 33 of Schedule A | nid. List pending loss | of your Value of property lost | | | | |
| Par | rt 7: List Certain Payments or Transfers | | -v.в. тторену. | | | | | |
| 16. | Within 1 year before you filed for bankrup consulted about seeking bankruptcy or placed like any attorneys, bankruptcy petition p | oreparing a bankruptcy petition? | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y | Description and value of any partners transferred | | payment Amount of ensfer was payment | | | | |
| | Seelinger Law Corporation 4640 Wolf Road Erie, PA 16505 rebeka@seelingerlaw.com | Attorney Fees | May | 2019 \$1,000.00 | | | | |
| 17. | Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that | ditors or to make payments to your cred | | er any property to anyone who | | | | |
| | ■ No | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | |
| | Person Who Was Paid Address | Description and value of any particles | | payment Amount of nsfer was payment | | | | |
| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. | | | | | | | |
| | Person Who Received Transfer | Description and value of | Describe any pro | perty or Date transfer was | | | | |
| | Address Person's relationship to you | property transferred | payments receive paid in exchange | | | | | |
| 19. | Within 10 years before you filed for bank beneficiary? (These are often called asset ■ No □ Yes. Fill in the details. | | o a self-settled trust or si | milar device of which you are a | | | | |
| | Name of trust | Description and value of the p | roperty transferred | Date Transfer was made | | | | |

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Debtor 1 Robert J Flood Debtor 2 Valerie A Flood

Case number (if known) 19-10488

| Par | t 8: | List of Certain Financial Accounts, In | strun | ments, Safe Depos | sit Boxes, and St | orage Unit | ts | | |
|-------|---|--|--|--|--------------------|--|----------------------------------|---|-----------------------|
| 20. | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | | Last 4 digits of Type of account number instrument | | unt or | Date account was closed, sold, moved, or transferred | ŀ | Last balance pefore closing or transfer | |
| 21. | | you now have, or did you have within 1 h, or other valuables? | year | before you filed fo | or bankruptcy, aı | ny safe de _l | posit box or other deposit | tory | / for securities, |
| | | No Yes. Fill in the details. | | | | | | | |
| | | me of Financial Institution dress (Number, Street, City, State and ZIP Code) | | Who else had ac Address (Number, State and ZIP Code) | | Describe | the contents | | Do you still have it? |
| 22. | Hav | e you stored property in a storage unit | or pla | ace other than you | ır home within 1 | year befor | re you filed for bankruptc | y? | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | | | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | | | pe the contents Do you have it? | | |
| Par | t 9: | Identify Property You Hold or Control | l for S | Someone Else | | | | | |
| 23. | | you hold or control any property that so someone. | omeo | ne else owns? Inc | lude any proper | ty you bor | rowed from, are storing fo | or, (| or hold in trust |
| | | No Yes. Fill in the details. | | | | | | | |
| | _ | vner's Name dress (Number, Street, City, State and ZIP Code) | | Where is the pro (Number, Street, City, Code) | | Describe | the property | | Value |
| Par | t 10: | Give Details About Environmental Inf | orma | ation | | | | | |
| For t | the p | ourpose of Part 10, the following definiti | ions a | apply: | | | | | |
| | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | | | | | |
| | | means any location, facility, or propert | - | - | environmental l | aw, wheth | er you now own, operate | , or | utilize it or used |
| | | rardous material means anything an env ardous material, pollutant, contaminant | | | s as a hazardous | waste, ha | zardous substance, toxic | su | bstance, |
| Rep | ort a | II notices, releases, and proceedings th | at yo | ou know about, reg | gardless of when | they occu | ırred. | | |
| 24. | Has | any governmental unit notified you tha | t you | ı may be liable or | potentially liable | under or i | n violation of an environn | nen | ital law? |
| | | No Voc Fill in the details | | | | | | | |
| | | Yes. Fill in the details. me of site dress (Number, Street, City, State and ZIP Code) | | Governmental u Address (Number, ZIP Code) | | | onmental law, if you it | | Date of notice |

Case 19-10488-TPA Doc 14 Filed 05/30/19 Entered 05/30/19 13:26:52 Desc Main Document Page 35 of 49 Debtor 1 Robert J Flood 19-10488 Valerie A Flood Case number (if known) Debtor 2 25. Have you notified any governmental unit of any release of hazardous material? Nο Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 7IP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Robert J Flood /s/ Valerie A Flood Robert J Flood Valerie A Flood Signature of Debtor 1 Signature of Debtor 2 Date May 30, 2019 **Date** May 30, 2019 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Statement of Financial Affairs for Individuals Filing for Bankruptcy

■ No

☐ Yes. Name of Person

Official Form 107

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Debtor 1 Robert J Flood Debtor 2 Valerie A Flood

Case number (if known) 19-10488

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| Fill in this infor | | | | |
|---------------------|-----------------------------|--------------------|-----------------|------------------------------------|
| Debtor 1 | Robert J Flood | | | |
| Debtor 2 | First Name Valerie A Flood | Middle Name | Last Name | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | WESTERN DISTRICT (| OF PENNSYLVANIA | |
| Case number | 19-10488 | | | |
| (if known) | | | | Check if this is an amended filing |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

| For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. | | | | | | |
|---|---|---|--|--|--|--|
| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? | | | | |
| Creditor's PSECU | ☐ Surrender the property. | □ No | | | | |
| name: | ☐ Retain the property and redeem it. | | | | | |
| Description of property securing debt: 2013 Ford Explorer 130000 miles Location: 17655 Route 89, Corry PA 16407 | ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: | ■ Yes | | | | |
| Creditor's PSECU | ■ Surrender the property. | □ No | | | | |
| Description of property securing debt: Description of property Securing debt: 2014 RAM 1500 130000 miles Location: 17655 Route 89, Corry PA 16407 | ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]: | ■ Yes | | | | |
| Creditor's Pennymac Loan Services name: | ☐ Surrender the property. ☐ Retain the property and redeem it. | □No | | | | |
| Description of property 17655 Route 89 Corry, PA 16407 Erie County | ■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]: | ■ Yes | | | | |

Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1 Robert J Flood Valerie A Flood | Case number (if known) | 19-10488 |
|--|---|-----------------------------------|
| securing debt: | | _ |
| Part 2: List Your Unexpired Personal Property Lea | 242 | |
| or any unexpired personal property lease that you li the information below. Do not list real estate lease | sted in Schedule G: Executory Contracts and Unexpire s. Unexpired leases are leases that are still in effect; the se if the trustee does not assume it. 11 U.S.C. § 365(p)(2) | e lease period has not yet ended. |
| Describe your unexpired personal property leases | | Will the lease be assumed? |
| Lessor's name: | | □ No |
| Description of leased Property: | | _ |
| rioperty. | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |
| | | |
| essor's name: Description of leased | | □ No |
| Property: | | ☐ Yes |
| _essor's name: | | □ No |
| Description of leased | | □ NO |
| Property: | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased Property: | | П у |
| Topony. | | ☐ Yes |
| Lessor's name: | | □ No |
| Description of leased Property: | | ☐ Yes |
| | | _ |
| Lessor's name: Description of leased | | □ No |
| Property: | | ☐ Yes |
| Part 3: Sign Below | | |
| | d my intention about any preparty of my octate that are | cures a debt and any personal |
| nder penalty of perjury, I declare that I have indicate roperty that is subject to an unexpired lease. | ed my intention about any property of my estate that see | cures a dept and any personal |
| (/s/ Robert J Flood | X /s/ Valerie A Flood | |
| Robert J Flood | Valerie A Flood | |
| Signature of Debtor 1 | Signature of Debtor 2 | |

Date

Date

May 30, 2019

May 30, 2019

| Fill in this infor | mation to identify your case: | Check one box only as directed in this form and in Form |
|--|--|---|
| Debtor 1 | Robert J Flood | 122A-1Supp: |
| Debtor 2 (Spouse, if filing) | Valerie A Flood | ■ 1. There is no presumption of abuse |
| United States Bankruptcy Court for the: Western District of Pennsylvania | | 2. The calculation to determine if a presumption of abuse applies will be made under <i>Chapter 7 Means Test</i> <i>Calculation</i> (Official Form 122A-2). |
| Case number (if known) | 19-10488 | ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later. |
| | | ☐ Check if this is an amended filing |
| Official F | orm 122A - 1 | |
| Chapter | 7 Statement of Your Current Monthly | Income 12/15 |
| attach a separate case number (if I | and accurate as possible. If two married people are filing together, both are sheet to this form. Include the line number to which the additional inform known). If you believe that you are exempted from a presumption of abuse by service, complete and file Statement of Exemption from Presumption of | ation applies. On the top of any additional pages, write your name and because you do not have primarily consumer debts or because of |
| Part 1: Ca | Iculate Your Current Monthly Income | |
| 1. What is y | your marital and filing status? Check one only. | |
| ☐ Not ma | arried. Fill out Column A, lines 2-11. | |
| ■ Marrie | ed and your spouse is filing with you. Fill out both Columns A and B | , lines 2-11. |
| ☐ Marrie | ed and your spouse is NOT filing with you. You and your spouse a | ire: |
| ☐ Livi | ng in the same household and are not legally separated. Fill out be | oth Columns A and B, lines 2-11. |
| | ng separately or are legally separated. Fill out Column A, lines 2-11 nalty of perjury that you and your spouse are legally separated under n | |

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

| | | | | | ımn A tor 1 | Debt | mn B or 2 or filing spouse |
|--|----------------|-----------------------|-----------------------------|----|----------------|------|----------------------------------|
| Your gross wages, salary, tips, bonuses, overtime, a payroll deductions). | and c | ommissio | ons (before all | \$ | 4,554.23 | \$ | 3,076.92 |
| Alimony and maintenance payments. Do not include Column B is filled in. | paym | ents from | a spouse if | \$ | 0.00 | \$ | 0.00 |
| All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household and roommates. Include regular contributions from a spe filled in. Do not include payments you listed on line 3. | Inclu , you | de regular depende | contributions nts, parents, | \$ | 0.00 | \$ | 0.00 |
| 5. Net income from operating a business, profession, | or far | | otor 1 | | | | |
| Cross respirate /hofers all deductions) | \$ | 0.00 | itor i | | | | |
| Gross receipts (before all deductions) Ordinary and necessary operating expenses | -\$ | 0.00 | | | | | |
| Net monthly income from a business, profession, or farm | · - | | Copy here -> | \$ | 0.00 | \$ | 0.00 |
| 6. Net income from rental and other real property | | | | | | | |
| | | | otor 1 | | | | |
| Gross receipts (before all deductions) | \$ | 0.00 | | | | | |
| Ordinary and necessary operating expenses | -\$ | 0.00 | | | | | |
| Net monthly income from rental or other real property | \$ | 0.00 | Copy here -> | \$ | 0.00 | \$ | 0.00 |
| | | | | Φ | 0.00 | \$ | 0.00 |

Official Form 122A-1

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| otor 1 otor 2 | Robert J Flood Valerie A Flood | | | Case numl | oer (if known) | 19-1048 | 8 | |
|---|---|--|---|--|---|---------------------------------|-----------------|------------------------------|
| | | | | Column A Debtor 1 | l | Column E Debtor 2 non-filing | or | |
| . Une | employment compensation | | | \$ | 0.00 | \$ | 0.00 | |
| | not enter the amount if you contend that the amount of social Security Act. Instead, list it here: | unt received was a be | nefit under | | | | | |
| F | or you | \$ | 0.00 | | | | | |
| F | or your spouse | | 0.00 | | | | | |
| Pen | asion or retirement income. Do not include any efit under the Social Security Act. | amount received that | was a | \$ | 0.00 | \$ | 0.00 | |
| Do r rece dom | ome from all other sources not listed above. Some from all other sources not include any benefits received under the Social eived as a victim of a war crime, a crime against the nestic terrorism. If necessary, list other sources of I below. | al Security Act or payn numanity, or internatio | nents nal or | | | | | |
| | • | | | \$ | 0.00 | \$ | 0.00 | |
| | | | | \$ | 0.00 | \$ | 0.00 | |
| | Total amounts from separate pages, if any. | | + | \$ | 0.00 | \$ | 0.00 | |
| | culate your total current monthly income. Add h column. Then add the total for Column A to the | | \$ | 4,554.23 | + \$_ | 3,076.92 | = \$ | 7,631.15 |
| rt 2: | Determine Whether the Means Test Applies | s to You | | | | | | |
| 2. Calc | Determine Whether the Means Test Applies culate your current monthly income for the ye . Copy your total current monthly income from lin | ear. Follow these steps | | Co | py line 11 | here=> | \$ | 7,631.15 |
| 2. Calc | culate your current monthly income for the ye | ear. Follow these steps | | Co | py line 11 | here=> | \$ | |
| 2. Cal d | culate your current monthly income for the ye . Copy your total current monthly income from lin | e 11 | | Co | py line 11 | | X | |
| 12a. | culate your current monthly income for the year. Copy your total current monthly income from lin Multiply by 12 (the number of months in a year) | ear. Follow these steps e 11 the form | | Co | py line 11 | | X | 12 |
| 12a. 12b. 12b. | culate your current monthly income for the ye . Copy your total current monthly income from lin Multiply by 12 (the number of months in a year) . The result is your annual income for this part of | ear. Follow these steps e 11 the form | | Co | py line 11 | | X | 12 |
| 12a. 12b. 3. Cald Fill i | culate your current monthly income for the year. Copy your total current monthly income from lin Multiply by 12 (the number of months in a year) The result is your annual income for this part of culate the median family income that applies the state in which you live. | the form to you. Follow these separates and the separates are separates as the separates are separa | | Co | py line 11 | | x 2b. \$ | 12 91,573.80 |
| 12b. 12b. Fill i Fill i | culate your current monthly income for the year. Copy your total current monthly income from line. Multiply by 12 (the number of months in a year). The result is your annual income for this part of culate the median family income that applies to in the state in which you live. | the form to you. Follow these separate you. Follow these separate you. PA 4 ze of household. go online using the lin | steps: | | | . 13 | X | 12 |
| 12a. 12b. 12b. Fill i Fill i To fi | culate your current monthly income for the year. Copy your total current monthly income from line. Multiply by 12 (the number of months in a year). The result is your annual income for this part of culate the median family income that applies the in the state in which you live. In the number of people in your household, in the median family income for your state and size in the list of applicable median income amounts, go in the aliest of applicable median income amounts, go in the median family income amounts. | the form to you. Follow these separate you. Follow these separate you. PA 4 ze of household. go online using the lin | steps: | | | . 13 | X | 12 91,573.80 |
| 12b. 12b. 12b. 12b. Fill i Fill i To fi for tl | culate your current monthly income for the year. Copy your total current monthly income from line. Multiply by 12 (the number of months in a year). The result is your annual income for this part of culate the median family income that applies the in the state in which you live. In the number of people in your household, in the median family income for your state and sizind a list of applicable median income amounts, go his form. This list may also be available at the barw do the lines compare? Line 12b is less than or equal to line 13. Go to Part 3. | the form to you. Follow these separate properties and the form to you. Follow these separate properties are properties and properties are properties and properties are properties and properties are properties and properties are properties are properties and properties are p | steps: k specified check box | in the sepa | rate instruc s no presur | . 13 ctions mption of abo | x \$ | 12 91,573.80 00,078.00 |
| 12b. 12b. 12b. 12b. 13c Calc Fill i Fill i To fi for tl 14a. 14b. | culate your current monthly income for the year. Copy your total current monthly income from line. Multiply by 12 (the number of months in a year). The result is your annual income for this part of culate the median family income that applies to in the state in which you live. In the number of people in your household, in the median family income for your state and signed a list of applicable median income amounts, you his form. This list may also be available at the bar of the lines compare? Line 12b is less than or equal to line 13. Go to Part 3. Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2. | the form to you. Follow these separate properties and the form to you. Follow these separate properties are properties and properties are properties and properties are properties and properties are properties and properties are properties are properties and properties are p | steps: k specified check box | in the sepa | rate instruc s no presur | . 13 ctions mption of abo | x \$ | 12 91,573.80 00,078.00 |
| 12b. 12b. 12b. 12b. 13c Calc Fill i Fill i To fi for tl 14a. 14b. | culate your current monthly income for the year. Copy your total current monthly income from line. Multiply by 12 (the number of months in a year). The result is your annual income for this part of culate the median family income that applies the in the state in which you live. In the number of people in your household. In the median family income for your state and six ind a list of applicable median income amounts, on this form. This list may also be available at the bar of the lines compare? Line 12b is less than or equal to line 13. Go to Part 3. Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2. Sign Below | the form to you. Follow these steps PA 4 ze of household. go online using the lin inkruptcy clerk's office On the top of page 1 p of page 1, check bo | steps: k specified check box x 2, The pre | in the sepa | rate instruc s no presur of abuse is | 13 ctions nption of abu | x \$ | 12 91,573.80 00,078.00 |
| 12a. 12b. 12b. 12b. 12b. 13c. 14b. 14a. 14b. | culate your current monthly income for the year. Copy your total current monthly income from line. Multiply by 12 (the number of months in a year). The result is your annual income for this part of culate the median family income that applies to in the state in which you live. In the number of people in your household, in the median family income for your state and six ind a list of applicable median income amounts, a find a list of applicable median income amounts, and the lines compare? Line 12b is less than or equal to line 13. Go to Part 3. Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2. Sign Below By signing here, I declare under penalty of perjuting the signing here, I declare under penalty of perjuting the signing here. | the form to you. Follow these separate of household. go online using the lininkruptcy clerk's office. On the top of page 1 p of page 1, check booking that the information of the separate o | steps: k specified check box x 2, The property | in the sepa | rate instructs no presur of abuse is | 13 ctions nption of abu | x \$ | 12 91,573.80 00,078.00 |
| 2. Calc 12a. 12b. 3. Calc Fill i Fill i To fi for th 1. How 14a. 14b. | culate your current monthly income for the year. Copy your total current monthly income from line. Multiply by 12 (the number of months in a year). The result is your annual income for this part of culate the median family income that applies to in the state in which you live. In the number of people in your household. In the median family income for your state and six ind a list of applicable median income amounts, on this form. This list may also be available at the base of the lines compare? Line 12b is less than or equal to line 13. Go to Part 3. Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2. Sign Below By signing here, I declare under penalty of perjutations. | the form to you. Follow these separate of household. go online using the lininkruptcy clerk's office. On the top of page 1 p of page 1, check booking that the information of the separate o | steps: k specified check box x 2, The properties n on this sta | in the separate of the separat | rate instructs no presur of abuse is d in any att | 13 ctions nption of abu | x \$ | 12 91,573.80 00,078.00 |
| 2. Calc 12a. 12b. 3. Calc Fill i Fill i To fi for th 14a. 14b. | culate your current monthly income for the year. Copy your total current monthly income from line. Multiply by 12 (the number of months in a year). The result is your annual income for this part of culate the median family income that applies the in the state in which you live. In the number of people in your household. In the median family income for your state and six ind a list of applicable median income amounts, and is form. This list may also be available at the base of the lines compare? Line 12b is less than or equal to line 13. Go to Part 3. Line 12b is more than line 13. On the togo to Part 3 and fill out Form 122A-2. Sign Below By signing here, I declare under penalty of perjunctions. | the form to you. Follow these separate of household. go online using the linunkruptcy clerk's office. On the top of page 1 p of page 1, check boury that the information | steps: k specified check box 2, The print n on this sta Valerie Signatur May 30 | in the separate of the separate of Debtor | rate instructs no presur of abuse is d in any att | 13 ctions nption of abu | x \$ | 12 91,573.80 00,078.00 |

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Debtor 1 Debtor 2 Robert J Flood Case number (if known) 19-10488

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 11/01/2018 to 04/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: One Ten

Income by Month:

| 6 Months Ago: | 11/2018 | \$4,040.76 |
|---------------|--------------------|------------|
| 5 Months Ago: | 12/2018 | \$4,040.76 |
| 4 Months Ago: | 01/2019 | \$7,121.60 |
| 3 Months Ago: | 02/2019 | \$4,040.76 |
| 2 Months Ago: | 03/2019 | \$4,040.76 |
| Last Month: | 04/2019 | \$4,040.76 |
| | Average per month: | \$4,554.23 |

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Debtor 1 Debtor 2 Robert J Flood Valerie A Flood Case number (if known) 19-10488

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 11/01/2018 to 04/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Union City Family Support Center

Income by Month:

| 6 Months Ago: | 11/2018 | \$3,076.92 |
|---------------|--------------------|------------|
| 5 Months Ago: | 12/2018 | \$3,076.92 |
| 4 Months Ago: | 01/2019 | \$3,076.92 |
| 3 Months Ago: | 02/2019 | \$3,076.92 |
| 2 Months Ago: | 03/2019 | \$3,076.92 |
| Last Month: | 04/2019 | \$3,076.92 |
| | Average per month: | \$3,076.92 |
| | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter | 7 : | Liquidation |
|----------|------------|--------------------|
| \$ | 245 | filing fee |
| : | \$75 | administrative fee |
| <u>+</u> | \$15 | trustee surcharge |
| \$ | 335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-10488-TPA Doc 14 Filed 05/30/19 Entered 05/30/19 13:26:52 Desc Main Document Page 47 of 49

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Pennsylvania

| In re | Valerie A Flood | | Case No. | 19-10488 |
|-------|-----------------|-----------|----------|----------|
| | | Debtor(s) | Chapter | 7 |
| | | | | - |

| | Debtor(s) Chapter 7 | | | | | | |
|----|--|--|--|--|--|--|--|
| | DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S) | | | | | | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | | | |
| | For legal services, I have agreed to accept \$ 1,835.00 | | | | | | |
| | Prior to the filing of this statement I have received \$ 1,000.00 | | | | | | |
| | Balance Due \$ 835.00 | | | | | | |
| 2. | \$ 335.00 of the filing fee has been paid. | | | | | | |
| 3. | The source of the compensation paid to me was: | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | |
| 4. | The source of compensation to be paid to me is: | | | | | | |
| | ■ Debtor □ Other (specify): | | | | | | |
| 5. | ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm | | | | | | |
| | ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. | | | | | | |
| 6. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | | | |
| | a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Legal fees paid prior to filing are for services rendered prior to filing. The balance due is for services rendered post filing such as attending the first scheduled Section 341 Meeting of Creditors, communicating with Client on all updates and reminding Client of post filing obligations. The debtor(s) and counsel have entered into a fee agreement that more specifically sets forth the agreement between the parties. | | | | | | |
| 7. | By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtor(s) in any dischargeability actions, judicial lien avoidances, communications with the Chapter 7 Trustee, the United States Trustee's Office, creditors, relief from stay actions, conversion, dismissal or plan default actions, any adjourned meeting of creditors, subsequent, or any other adversary proceeding, reaffirmation or redemption agreements, amendment fees or costs, fees associated with the appointment of any professional or expert witness, sale or transfer of property, or any motion or application seeking the approval of settlements of civil actions. Debtor(s) are responsible for all costs necessary for the preparation, continuation or filing of the case. | | | | | | |
| | The above services will be billed at the rate of \$300 per hour in increments of 1/10th hour. Said rate is subject to change based upon annual review/audit by the lawfirm. | | | | | | |
| | Fee based on agreed hourly rate of \$300.00 subject to increases or decreases per fee agreement. | | | | | | |
| | A separate legal fee agreement has been entered into between the debtor(s) and his/her counsel prior to filing which enumerates all fees and costs in more specificity regarding payment for costs and legal services provided to the debtor(s) for this case. | | | | | | |

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| In re | Robert J Flood Valerie A Flood | | Case No. | 19-10488 | |
|-------|-----------------------------------|-----------|----------|----------|--|
| | | Debtor(s) | | | |

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

| · | CERTIFICATION | | | | | |
|---|-----------------------------|--|--|--|--|--|
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. | | | | | | |
| May 30, 2019 | /s/ Rebeka A Seelinger Esq. | | | | | |
| Date | Rebeka A Seelinger Esq. | | | | | |
| | Signature of Attorney | | | | | |
| | Seelinger Law Corporation | | | | | |
| | 4640 Wolf Road | | | | | |
| | Erie, PA 16505 | | | | | |
| | 814 824 6670 | | | | | |
| | rebeka@seelingerlaw.com | | | | | |
| | Name of law firm | | | | | |

Case 19-10488-TPA Doc 14 Filed 05/30/19 Entered 05/30/19 13:26:52 Desc Main Document Page 49 of 49

United States Bankruptcy Court Western District of Pennsylvania

| In re | Valerie A Flood | | Case No. | 19-10488 |
|--------|---------------------------------|---|---------------------|---------------------|
| | | Debtor(s) | Chapter | 7 |
| | | | | |
| | X/17.17 | | | |
| | VER | RIFICATION OF CREDITOR | MATRIX | |
| | | | | |
| | | | | |
| ne abo | ove-named Debtors hereby verify | that the attached list of creditors is true and | correct to the best | of their knowledge. |
| | | | | |
| | | | | |
| ate: | May 30, 2019 | /s/ Robert J Flood | | |
| | | Robert J Flood | | |
| | | Signature of Debtor | | |
| \ota. | May 30, 2019 | /s/ Valerie A Flood | | |
| Date: | Iviay 30, 2013 | /S/ Valerie A Flood | | |

Signature of Debtor

Robert J Flood